## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

**Application or Docket Number** 

10/088996

| CLAIMS AS FILED - PART I (Column 1) (Column 2)  |   |   |  |                               |                                  |                  | _     | SMALL ENTITY TYPE   |                        |                | OTHER THAN<br>OR SMALL ENTITY |                        |  |
|---|---|---|--|-------------------------------|----------------------------------|------------------|-------|---------------------|------------------------|----------------|-------------------------------|------------------------|--|
| TOTAL CLAIMS  |   |   |  |                               |                                  |                  | ſ     | RATE                | FEE                    |                | RATE                          | FEE                    |  |
| FOR   |   |   | NUMBER FILED                           |                               | NUMBER EXTRA                     |                  |       | BASIC FEE           |                        | OR             | ASIC FEE                      | 890                    |  |
| TOTAL CHARGEABLE CLAIMS   |   |   | minus 20=                              |                               | *                                |                  |       | X\$ 9=              |                        | OR             | X\$18=                        |                        |  |
| INDEPENDENT CLAIMS  |   |   | 2 m                                    | inus 3 =                      | *                                |                  |       | X42=                |                        | OR             | X84=                          |                        |  |
| MULTIPLE DEPENDENT CLAIM PI   |   |   | RESENT                                 |                               |                                  |                  |       | +140=               |                        | OR             | +280=                         |                        |  |
| * If the difference in column 1 is less tha   |   |   |  | n zero, enter "0" in column 2 |                                  |                  | ı     | TOTAL               |                        | OR             | TOTAL                         | 890                    |  |
|   | Cl  | _AIMS AS A                                | MENDED - PART II (Column 2) (Column 3) |                               |                                  |                  | SMALL | NTITY               | OR                     | OTHER<br>SMALL |                               |                        |  |
|   | CLAIMS  |   | HIGH                                   |                               | EST                              |                  | 1     |                     | ADDI-                  | Г              |                               | ADDI-                  |  |
| AMENDMENT A   |   | REMAINING<br>AFTER<br>AMENDMENT           |  | PREVI                         | IBER<br>OUSLY<br>FOR             | PRESENT<br>EXTRA |       | RATE                | TIONAL<br>FEE          |                | RATE                          | TIONAL<br>FEE          |  |
| DME   | Total   | *   | Minus                                  | **                            |                                  | =                |       | X\$ 9=              |                        | OR             | X\$18=                        |                        |  |
| MEN   | Independent   | *   | Minus                                  | ***                           |                                  | =                |       | X42=                |                        | OR             | X84=                          |                        |  |
| L   | FIRST PRESENTATION OF MULTIPLE DEPENDENT  |   |  |                               |                                  |                  |       | +140=               |                        | OR             | +280=                         |                        |  |
| BEST AVAILABLE COPY   |   |   |  |                               |                                  |                  |       | TOTAL               |                        |                | TOTAL<br>ADDIT, FEE           |                        |  |
| (Column 1) (Column 2) (Column 3)  |   |   |  |                               |                                  |                  |       |                     |                        |                | ADDII. I CC                   |                        |  |
| ENT B   |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |  | HIG<br>NUI<br>PREV            | HEST<br>MBER<br>IOUSLY<br>D FOR  | PRESENT<br>EXTRA |       | RATE                | ADDI-<br>TIONAL<br>FEE |                | RATE                          | ADDI-<br>TIONAL<br>FEE |  |
| N S   | Total   | *   | Minus                                  | **                            |                                  | =                |       | X\$ 9=              |                        | OR             | X\$18=                        |                        |  |
| AMENDMENT   | Independent   | *   | Minus                                  | ***                           |                                  | =                |       | X42=                |                        | OR             | X84=                          |                        |  |
|   | FIRST PRESE   | NTATION OF M                              | OLTIPLE DI                             | PENUEN                        | II CLAIN                         | <u> </u>         | J     | +140=               |                        | OR             | +280=                         |                        |  |
|   |   |   |  |                               |                                  |                  |       | TOTAL<br>ADDIT. FEE |                        | or             | TOTAL<br>ADDIT. FEI           |                        |  |
|   | (Column 1) (Column 2) (Column 3)  |   |  |                               |                                  |                  |       |                     |                        |                |                               |                        |  |
| AMENDMENT C   |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |  | NU<br>PRE\                    | HEST<br>MBER<br>/IOUSLY<br>D FOR | PRESENT<br>EXTRA |       | RATE                | ADDI-<br>TIONAL<br>FEE |                | RATE                          | ADDI-<br>TIONAL<br>FEE |  |
|   | Total   | *   | Minus                                  | **                            |                                  | =                |       | X\$ 9=              |                        | OR             | X\$18=                        |                        |  |
| ME  | Independent   | *   | Minus                                  | ***                           |                                  |                  |       | X42=                |                        | OR             | X84=                          |                        |  |
|   | FIRST PRESI   | ENTATION OF                               | MULTIPLE D                             | EPENDE                        | NT CLAII                         | M                | _     | +140=               |                        | OR             |                               |                        |  |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. |   |   |  |                               |                                  |                  |       |                     |                        | OR             | TOTA                          | L.                     |  |
| :   | ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |   |  |                               |                                  |                  |       |                     |                        |                |                               |                        |  |